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October 17, 2018

VIA ELECTRONIC FILING

Marlene H. Dortch, Secretary
Federal Communications Commission
445 12th Street, S.W., Room TW-B204
Washington, DC 20554

Re: Notice of *Ex Parte* in WC Docket Nos. 02-60, 17-310

Madam Secretary:

In accordance with Section 1.1206 of the Commission's rules,¹ we hereby provide notice of an oral and written *ex parte* presentation in connection with the above-captioned proceedings. On Friday, October 12, 2018, Tom Reid of Reid Consulting, Project Coordinator for the Southern Ohio Health Care Network (SOHCN),² and undersigned counsel, met separately with Nirali Patel, Special Counsel to Chairman Pai, Ariel Roth, Wireline Legal Advisor to Commissioner O'Rielly, and Travis Litman, Chief of Staff and Senior Legal Advisor to Commissioner Rosenworcel. We also met with staff from the Wireline Competition Bureau (WCB): Elizabeth Drogula, Deputy Division Chief, Telecommunications Access Policy Division (TAPD), and legal advisors Regina Brown and Preston Wise. (Katie King from WCB was also present for a separate, unrelated presentation by Mr. Reid.)

The purpose of our meetings was to review SOHCN's success in utilizing Rural Health Care program funding to meet the healthcare and broadband access needs in rural southeastern Ohio, and to offer analysis and suggestions for modifications to the Commission's definition of "rural" in the current program.³ Mr. Reid reiterated his ability and willingness to model current programmatic data using the Geographic Information System (GIS) and different definitions of rural.

Sincerely,



Jeffrey A. Mitchell
Counsel for Adena Health System/SOHCN

Attachment

¹ 47 C.F.R. § 1.1206.

² <http://www.sohcn.org/>

³ See *Promoting Telehealth in Rural America*, WC Docket No. 17-310, Notice of Proposed Rulemaking and Order, 32 FCC Rcd 10631, ¶ 25 (2017); 47 CFR § 54.600 (b) (defining rural area based on relationship to Core Based Statistical Areas or Urban areas with a population of greater than 25,000 as established by the Decennial Census.).



Unintended Consequences

The Definition of “Rurality” in the FCC Healthcare Connect Fund

October 2018

Tom Reid

Project Coordinator – Board Appointed

Tom@SOHCN.org

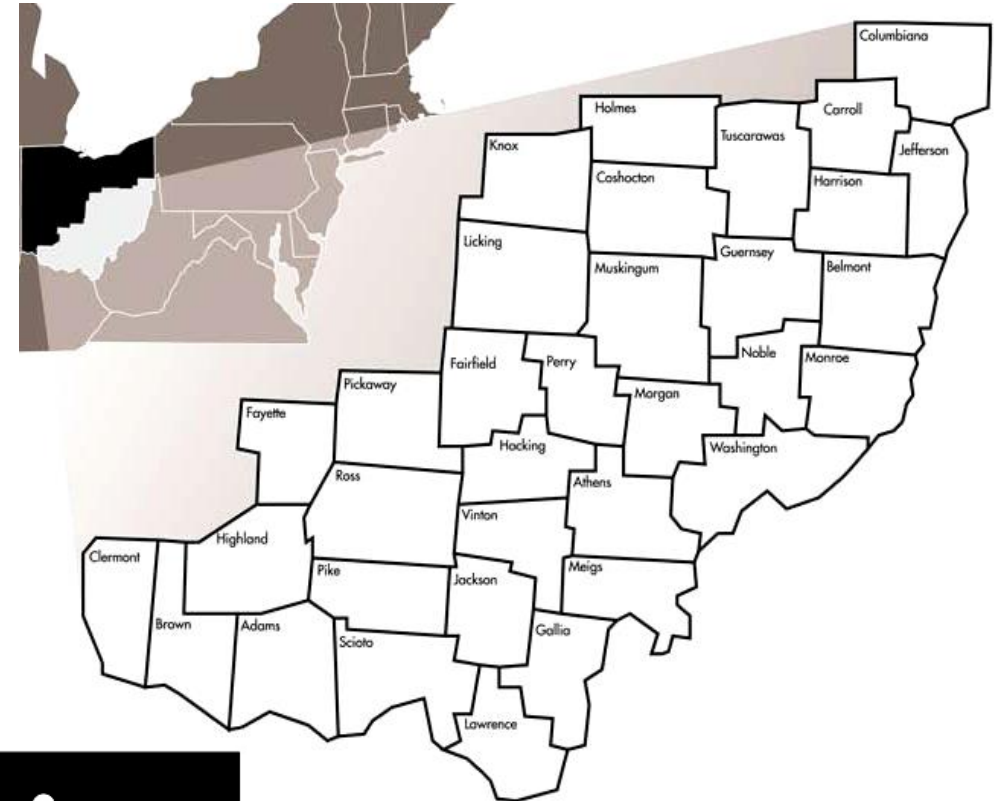
740-590-0076





Middle Mile Progress

- The SOHCN represents 34 rural Ohio counties
- \$130 million in middle mile fiber projects
 - FCC Rural Health Care Pilot Program (\$16M)
 - NTIA BTOP Program (\$66M)
 - Private Match (\$48M)
- 170+ health care facilities connected
- Robust ringed DWDM network delivering Ethernet, full wavelength and dark fiber services

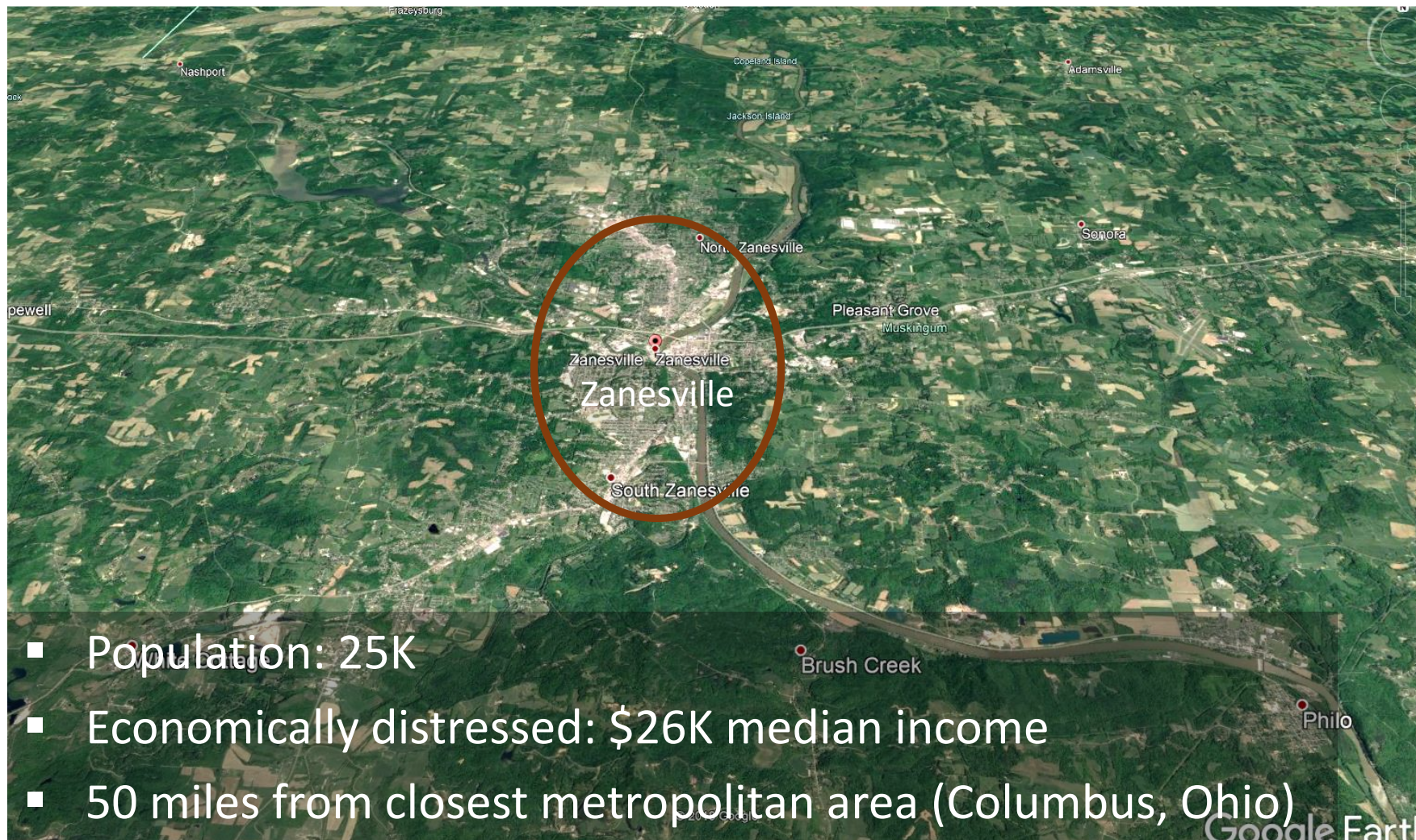


Upper Arlington, Ohio



- Population: 35K
- Affluent suburb: \$102K median income
- Adjoining Columbus, Ohio with metro population of 1.4M

Zanesville, Ohio





Lack of Differentiation

Under Existing FCC Definition of Rural

- **No differentiation** between these two towns of very different circumstances
- Both designated as “**urban**”

Impact Distorts Funding

- Rural sites for which funding intended **disqualified** due to population of “urban cluster” of greater than 25,000
- Urban sites for which funding **not intended** receive funding if population less than 25,000



Switching Definition of Rural

USDA Rural-Urban Commuting Area (RUCA) Codes

Propose FCC Switch to RUCA Codes

- Much better classification of rurality than existing FCC definition (while not perfect – a big step forward)
- Ten degrees of rurality from “1” for urban to “10” for frontier

Zanesville, Ohio

RUCA Codes

- 4 in the town
- 5 and 6 in surrounding Muskingum County

Upper Arlington, Ohio

RUCA Codes

- 1 in the town
- 1 and 2 in surrounding Franklin County

**If provided access to the site-by-site funding data for the HCF,
we can easily model impact on funding cap**



Differential Funding

Switching to RUCA codes enables differential funding

Example of possible subsidy tiers in the Healthcare Connect Fund

RUCA of 1-3 = Urban	40% Subsidy
RUCA of 4-6 = Rural	70% Subsidy
RUCA of 7-9 = Remote	85% Subsidy
RUCA of 10 = Frontier	95% Subsidy